## 3 AVAILABLE COpplication or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

		CLAIMS AS	S FILED -	SI	SMALL ENTITY			OTHER	OTHER THAN			
	- : -: : : : : : : : : : : : : : : : :		(Column 1)		(Column 2)			TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			23			***		RATE	FEE	]	RATE	FEE
FOR			NUMBER I	IUMBER FILED		NUMBER EXTRA		ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			23 minus 20=		*	· 3		X\$ 9=		OR	X\$18=	54
INDEPENDENT CLAIMS			9 minus 3 =		*	*		X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	764	
CLAIMS AS AMENDED - PART II											OTHER	
(Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	SMALLE	
AMENDMENT A	***	CLAIMS REMAINING AFTER AMENDMENT	年 编 成 序 <del>學</del> 內	HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 32	Minus	** 2	20)	= 12	L	X\$ 9=	l	OR	X\$18=	21600
	Independent	* 2	Minus	***	<u>3</u>	-		X40=		OR	X80=	
<u> </u>	FIHST PHESE	NTATION OF MU	JLIIPLE DEP	ENDEN	CLAIIVI			+135=		OR	+270=	
							<u></u>	TOTAL			TOTAL	
		(Calumn 1)		(Colu	O)	(Calumn 2)		DDIT. FEE	<del></del>	<b>,</b>	ADDIT. FEE	
	br. 13 %	(Column 1) CLAIMS	9 1 7	(Colur	HEST	(Column 3)	1 _		ADDI-			ADDI-
AMENDMENT B	<b>**</b> **********************************	REMAINING AFTER AMENDMENT	* 2 %	NUM PREVIO PAID	OUSLY	PRESENT EXTRA	ig ig	RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		J					
							L	+135=		OR	+270=	
							AD	TÖTAL DIT. FEE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	**************************************	=	]   ;	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	╽┝	X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	'ENDENT	Γ CLAIM		J ├─					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=		
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												